

<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/925,613	
	Filing Date	August 9, 2001	
	First Named Inventor	Attila Szepesvary et al.	
	Art Unit	2192	
	Examiner Name	James D. Rutten	
Total Number of Pages in This Submission	18	Attorney Docket Number	021756-070700US

ENCLOSURES <i>(Check all that apply)</i>					
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <b>(Appeal Notice, Brief, Reply Brief)</b> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Appendices A & B to the Specification	<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account No. 20-1430.</td> </tr> </table>	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account No. 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account No. 20-1430.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name	Kilpatrick Townsend & Stockton LLP				
Signature	/Scott S. Adams/				
Printed name	Scott S. Adams				
Date	January 14, 2011	Reg. No.	63,302		

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